



MEETING ABSTRACT

Open Access

Identification of new genetic alterations in MLH1, MSH2 and MSH6 using IHC and HRM analysis in Lynch syndrome-suspected patients

A Mazurek^{1*}, A Fiszler-Kierzkowska², M Budryk¹From Annual Conference on Hereditary Cancers 2011
Szczecin, Poland. 17-18 November 2011

Mutations in DNA MMR genes, mainly MSH2 and MLH1, are the most frequent cause of HNPCC, an autosomal dominant predisposition to colorectal cancer and other malignancies. In our study we tested 46 unrelated patients with suspected HNPCC, who met Bethesda criteria. Tumors from probands (when available) were tested by immunohistochemistry for deficiencies in MLH1, PMS2, MSH2 and MSH6. DNA samples were analyzed using high-resolution melting (HRM). PCR amplicons were designed to scan complete MLH1, MSH2 and MSH6 coding sequences using HRM method. In the first stage of screening HRM analysis was performed by scanning 14 amplicons selected as potentially harboring most frequent mutations in Polish population (Kurzwaski et al., 2005). Sequencing was used to confirm and characterize affected exons identified in HRM.

Three novel deleterious mutations were found in MSH2 gene, one of them being splice acceptor site mutation in exon 5, and two of them being nonsense mutations in exons 6 and 8. Tumours from patients bearing these mutations were lacking MSH2 protein. We found also missense mutation in exon 8 of MLH1, which has not been previously reported in Polish population. Tumour from this patient exhibited weak expression of MLH1 and PMS2 proteins. In 42 patients, only unspecified variants and polymorphisms have been found so far (analysis is still in progress).

In our opinion, HRM is a rapid, inexpensive and high-throughput method to prescreen for point mutation and small deletions in MMR genes. Technical aspects concerning analysis of one-replicate versus 2-replicates data will be

discussed. It must be noted that HRM cannot be used alone, MLPA and array-CGH are still required for detection of large deletions and chromosome rearrangements.

Author details

¹Maria Skłodowska-Curie Memorial Cancer Center and Institute of Oncology, Gliwice, Poland. ²Ludwik Hirszfeld Institute of Immunology and Experimental Therapy, Polish Academy of Sciences, Wrocław, Poland.

Published: 20 April 2012

doi:10.1186/1897-4287-10-S3-A11

Cite this article as: Mazurek et al.: Identification of new genetic alterations in MLH1, MSH2 and MSH6 using IHC and HRM analysis in Lynch syndrome-suspected patients. *Hereditary Cancer in Clinical Practice* 2012 **10**(Suppl 3):A11.

Submit your next manuscript to BioMed Central and take full advantage of:

- Convenient online submission
- Thorough peer review
- No space constraints or color figure charges
- Immediate publication on acceptance
- Inclusion in PubMed, CAS, Scopus and Google Scholar
- Research which is freely available for redistribution

Submit your manuscript at
www.biomedcentral.com/submit* Correspondence: agamaz3@tlen.pl¹Maria Skłodowska-Curie Memorial Cancer Center and Institute of Oncology, Gliwice, Poland

Full list of author information is available at the end of the article